



Receipt

PATENT  
Attorney Docket No. 214678

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: BAHL

Application No. 10/014,104

Filed: December 11, 2001

For: CHANNEL ACCESS SCHEME FOR USE IN NETWORK COMMUNICATIONS

Group Art Unit: 2664

Examiner: Not Known

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MAY 07 2002

Technology Center 2600

**REQUEST FOR CORRECTED FILING RECEIPT**

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Washington, D.C. 20231

Dear Sir:

Applicant respectfully requests that a corrected version of the Official Filing Receipt be issued for the above-identified patent application. Please change the domestic priority data to read:

THIS APPLICATION IS A CONTINUATION OF 09/169,418 10/09/1998

because this application is a continuation and not a divisional.

Please enter the correction as noted on the enclosed copy of the Official Filing Receipt dated 01/04/2002.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Phillip M. Pippenger".

Phillip M. Pippenger, Reg. No. 46,055  
One of the Attorneys for Applicants  
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Date: April 4, 2002



## UNITED STATES PATENT AND TRADEMARK OFFICE

*Matthew*  
 COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/014,104	12/11/2001	2664	824	214678	10	16	4

23460  
 LEYDIG VOIT & MAYER, LTD  
 TWO PRUDENTIAL PLAZA, SUITE 4900  
 180 NORTH STETSON AVENUE  
 CHICAGO, IL 60601-6780



CONFIRMATION NO. 5095

## FILING RECEIPT



\*OC000000007265730\*

Date Mailed: 01/04/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Paramvir Bahl, Issaquah, WA;

## Assignment For Published Patent Application

Microsoft Corporation, Redmond, WA;

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## Domestic Priority data as claimed by applicant

THIS APPLICATION IS A ~~PAT~~ OF 09/169,418 10/09/1998*CONTINUATION*

## Foreign Applications

If Required, Foreign Filing License Granted 01/03/2002

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Projected Publication Date: 04/11/2002

JAN 11 2002

Non-Publication Request: No

PAT/TM Due Date Entered

Early Publication Request: No

*RCB*

## Title

Channel access scheme for use in network communications

## Preliminary Class

*LAH*



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Bib Data Sheet

**CONFIRMATION NO. 5095**

SERIAL NUMBER 10/014,104	FILING DATE 12/11/2001 RULE	CLASS 370	GROUP ART UNIT 2664	ATTORNEY DOCKET NO. 214678
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**APPLICANTS**

Paramvir Bahl, Issaquah, WA;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A CON OF 09/169,418 10/09/1998

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 01/03/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	WA	10	16	4
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

23460

**TITLE**

Channel access scheme for use in network communications

FILING FEE RECEIVED 824	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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